

**TRANSMITTAL LETTER TO THE UNITED STATES  
DESIGNATED/ELECTED OFFICE (DO/EO/US)  
CONCERNING A SUBMISSION UNDER 35 U.S.C. 371**

ATTORNEY'S DOCKET NUMBER  
12406-220US1 P2004,0327 US N

U.S. APPLICATION NO. (If known, see 37 C.F.R. 1.5)

INTERNATIONAL APPLICATION NO.  
PCT/DE2005/000736

INTERNATIONAL FILING DATE  
April 21, 2005

PRIORITY DATE CLAIMED  
April 22, 2004

**TITLE OF INVENTION**

PROCESS FOR STRUCTURING AT LEAST ONE LAYER AS WELL AS ELECTRICAL COMPONENT WITH STRUCTURES FROM THE LAYER

**APPLICANT(S) FOR DO/EO/US**

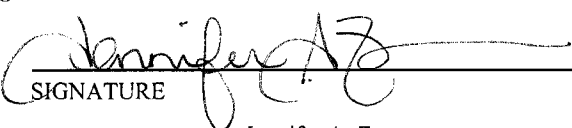
Maja Hackenberger, Johannes Voelkl and Roland Zeisel

Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:

1. ☒ This is a **FIRST** submission of items concerning a submission under 35 U.S.C. 371.
2. ☐ This is a **SECOND** or **SUBSEQUENT** submission of items concerning a submission under 35 U.S.C. 371.
3. ☐ This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below.
4. ☐ The US has been elected (Article 31).
5. ☒ A copy of the International Application as filed (35 U.S.C. 371(c)(2))
  - a. ☐ is attached hereto (required only if not communicated by the International Bureau).
  - b. ☒ has been communicated by the International Bureau.
  - c. ☐ is not required, as the application was filed in the United States Receiving Office (RO/US).
6. ☒ An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)).
  - a. ☒ is attached hereto.
  - b. ☐ has been previously submitted under 35 U.S.C. 154(d)(4).
7. ☐ Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3))
  - a. ☐ are attached hereto (required only if not communicated by the International Bureau).
  - b. ☐ have been communicated by the International Bureau.
  - c. ☐ have not been made; however, the time limit for making such amendments has NOT expired.
  - d. ☐ have not been made and will not be made.
8. ☐ An English language translation of amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).
9. ☐ An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).
10. ☐ An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)).

**Items 11 to 20 below concern document(s) or information included:**

11. ☒ An Information Disclosure Statement under 37 C.F.R. 1.97 and 1.98.
12. ☐ An assignment document for recording. A separate cover sheet in compliance with 37 C.F.R. 3.28 and 3.31 is included.
13. ☐ A preliminary amendment.
14. ☒ An Application Data Sheet under 37 C.F.R. 1.76.
15. ☐ A substitute specification.
16. ☐ A power of attorney and/or change of address letter.
17. ☐ A computer-readable form of the sequence listing in accordance with PCT Rule 13~~ter~~.2 and 37 C.F.R. 1.821 - 1.825.
18. ☐ A second copy of the published international application under 35 U.S.C. 154(d)(4).
19. ☐ A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).
20. ☒ Other items or information:  
Certificate of Translation

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |              |                                                                                                                          |         |                                                          |        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------------------------------------------------------------------------------------------------------------------|---------|----------------------------------------------------------|--------|
| U.S. APPLICATION NO. (if known, see 37 C.F.R. 1.5)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |              | INTERNATIONAL APPLICATION NO.<br>PCT/DE2005/000736                                                                       |         | ATTORNEY'S DOCKET NUMBER<br>12406-220US1 P2004,0327 US N |        |
| The following fees have been submitted                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                                                          |         | <b>CALCULATIONS PTO USE ONLY</b>                         |        |
| 21. <input checked="" type="checkbox"/> Basic national fee (37 CFR 1.492(a)).....\$300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                                                          |         | \$300.00                                                 |        |
| 22. <input type="checkbox"/> Examination fee (37 CFR 1.492(c))<br>If the written opinion prepared by ISA/US or the international preliminary examination report prepared by IPEA/US indicates all claims satisfy provisions of PCT Article 33(1)-(4) .....\$0<br>All other situations .....\$200                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |              |                                                                                                                          |         | \$0.00                                                   |        |
| 23. <input type="checkbox"/> Search fee<br>If the written opinion of the ISA/US or the international preliminary examination report prepared by IPEA/US indicates all claims satisfy provisions of PCT Article 33(1)-(4) .....\$0<br>Search fee (37 CFR 1.445(a)(2)) has been paid on the international application to the USPTO as an International Searching Authority.....\$100<br>International Search Report prepared by an ISA other than the US and provided to the Office or previously communicated to the US by the IB.....\$400<br>All other situations .....\$500                                                                                                                                                                                                                                               |              |                                                                                                                          |         | \$0.00                                                   |        |
| <b>Total of 21, 22 and 23 =</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |              |                                                                                                                          |         | \$300.00                                                 |        |
| <input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium).<br>The fee is \$250 for each additional 50 sheets of paper or fraction thereof.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |              |                                                                                                                          |         |                                                          |        |
| Total Sheets                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Extra Sheets | Number of each additional 50 or fraction thereof (round up to a whole number)                                            | RATE    |                                                          |        |
| -100 =                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | /50=         |                                                                                                                          | X \$250 | \$0.00                                                   |        |
| Surcharge of \$130 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 C.F.R. 1.492(h)).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |              |                                                                                                                          |         | \$0.00                                                   |        |
| CLAIMS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | NUMBER FILED | NUMBER EXTRA                                                                                                             | RATE    |                                                          |        |
| Total Claims                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | - 20 =       |                                                                                                                          | x \$50  | \$0.00                                                   |        |
| Independent Claims                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | - 3 =        |                                                                                                                          | x \$200 | \$0.00                                                   |        |
| MULTIPLE DEPENDENT CLAIM(S) (if applicable)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                                                                                                                          | + \$360 | \$0.00                                                   |        |
| <b>TOTAL OF ABOVE CALCULATIONS =</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |              |                                                                                                                          |         | \$300.00                                                 |        |
| <input type="checkbox"/> Applicant claims small entity status. See 37 C.F.R. 1.27. Fees above are reduced by 1/2.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                          |         | \$0.00                                                   |        |
| <b>SUBTOTAL =</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                          |         | \$300.00                                                 |        |
| Processing fee of \$130 for furnishing the English Translation later than 30 months from the earliest claimed priority date (37 C.F.R. 1.492(i))                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |              |                                                                                                                          |         | \$0.00                                                   |        |
| <b>TOTAL NATIONAL FEE =</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                                                                                                                          |         | \$300.00                                                 |        |
| Fee for recording the enclosed assignment (37 C.F.R. 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 C.F.R. 3.28, 3.31). \$40.00 per property                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |              |                                                                                                                          |         | \$0.00                                                   |        |
| <b>TOTAL FEES ENCLOSED =</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |              |                                                                                                                          |         | \$300.00                                                 |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |              |                                                                                                                          |         | <b>Amount to be refunded:</b>                            | \$0.00 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |              |                                                                                                                          |         | <b>Amount to be charged:</b>                             | \$0.00 |
| <p>a. <input type="checkbox"/> A check in the amount of \$0.00 to cover the above fees is enclosed.</p> <p>b. <input checked="" type="checkbox"/> Please charge my Deposit Account No. 06-1050 in the amount of \$300.00 to cover the above fees. A duplicate copy of this sheet is enclosed.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 06-1050. A duplicate copy of this sheet is enclosed.</p> <p>d. <input type="checkbox"/> Fees are to be charged to a credit card. <b>WARNING:</b> Information on this form may become public. <b>Credit card information should not be included on this form.</b> Provide credit card information and authorization on PTO-2038.</p> |              |                                                                                                                          |         |                                                          |        |
| <p><b>NOTE:</b> Where an appropriate time limit under 37 C.F.R. 1.495 has not been met, a petition to revive (37 C.F.R. 1.137(a) or (b) must be filed and granted to restore the International Application to pending status.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                          |         |                                                          |        |
| SEND ALL CORRESPONDENCE TO:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                                                                                                                          |         |                                                          |        |
| PTO Customer No:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |              | 26181                                                                                                                    |         |                                                          |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |              | <br>SIGNATURE<br>Jennifer A. Zanicco |         |                                                          |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |              | NAME                                                                                                                     |         |                                                          |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |              | 54,563                                                                                                                   |         |                                                          |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |              | REGISTRATION NUMBER                                                                                                      |         |                                                          |        |